NAME:	DATE		
		Received	Need
1. Application Form			
2. \$200.00 Application fee			
3. Core Curriculum Form			
4. Official transcript from unive	ersity		
5. Other training credential documentation (if applying for specialization)			
6. References and Recommend	ations		
7. Statement of Intent			
8. Supervised experience docur (if applicable)	mentation		
9. Criminal Background Check	Report		
10. Verification of State Profess License/certificate (if applie			
11. NCE/AAMFT Examination	Scores		
12. Specialization Application:	(if Applicable)		
13. Letter from Dean (if applyin	ng prior to graduation)		
14. C.2.h Plan (see code of ethi	cs, pg.10)		
OTHER:			
When all the items have been	received and approve	d, you will be not	ified of the da

te, time, and place for the oral examination.

If the licensure process has not been completed in one calendar year from the date of the application, the applicant may request an extension for the application to remain active for an additional twelve months. If the application is not completed and becomes inactive the file is archived for five years. If the applicant decides to apply, he/she must submit a new application, credentials and meet the requirements in place the date the new application is received.

## Fees non-refundable (Arkansas Code Annotated §17-27-310(b)

Fnoloced.	Code of Ethics	Background Materials per Act 1317	NCE Registration Form

GO TO WEB SITE AT www.state.ar.us/abec and CLICK LAWS, RULES & REGULATIONS THEN CLICK RULES ACT 593,244 & ACT 753: PRINT RULES AND **REGULATIONS FOR YOUR FILE. (52 PAGES)** 

Applicant is responsible for complying with the ACA Code of Ethics and the Rules, Pages 1-52 at all times.